

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 123

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Association for Advanced Life Underwriting PAC (AALU PAC)

**A.**

Full Name (Last, First, Middle Initial)

Stephen Burk

Mailing Address 9401 Indian Creek Parkway  
Suite 150

City State Zip Code  
Shawnee Msn KS 66210-2096

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Insurance Designers of Ka-  
nsas

Occupation  
Principal

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 2 / 2 0 1 1

Transaction ID: SA11AI-79-1872-P

Amount of Each Receipt this Period

1200.00

**[MEMO ITEM]**

Partnership Subitemization  
of Insurance Designers of  
Kansas City, LLC

**B.**

Full Name (Last, First, Middle Initial)

Nebojas Subotic

Mailing Address 677 Ala Moana Boulevard  
Suite 705

City State Zip Code  
Honolulu HI 96813-5404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wealth Strategy Partners  
LLC

Occupation  
President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: SA11AI-2581-2023-P

Amount of Each Receipt this Period

500.00

**[MEMO ITEM]**

Partnership Subitemization  
of Wealth Strategy Partne-  
rs LLC

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

218783.33